## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<i>3/<u>□</u>7/∞</i>	Address:	2315 Merchants Mile
Case #:	96 F02936		Chemles, Is
County:	BOUTEDOMEN		
Type of I	.ahoratory Seizure (check one)	Seizure Location (c	heck all that apply)
Chemi	tional Lab ical/Glassware/Equipment (only) site (only)	Residence Outbuilding  Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)  Lithium/Ammonia Reaction(s):   Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: Volters			
Water Reactive Metal (Lithium): Vilvus			
Anhydrous Ammonia: Vunue			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid: Venue			
Corrosive Base:			
Other (item and location):			
Child under age 18 discovered (check one)  Yes (number present)  No  *If yes, fax report to Child Protective Services		Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other:	
This report is to be faxed to the following agencies that serve the location:			
Health Department: Burnowww C.  Child Protection Service: 18		Fax: 872-376-25€8 Fax: 812-376-25€8 Fax:	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: 3/2-2/2-18-52  Phone 3/2-2/2-18-52  ** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.  *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.			